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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).					Complete if Known					
					Application Number		10/670,326-Conf. #5080			
FEE TRANSMITTAL					Filing Date		September 26, 2003			
For FY 2009					First Named Inventor		Yong Cheol PARK			
TOI.F1 2009					Examiner Name		L. Bibbins			
Applicant claims small entity status. See 37 CFR 1.27					Art Unit		2627			
TOTAL AMOUNT OF PAYMENT (\$) 810.00				Attomey Docke	t No.	0465-1030P				
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):										
X Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
x Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17										
FEE CALCULATION										
1. BASIC FILING, SEARCH, AND EXAMINATION FEES										
FILING FEES SEARCH FEES EXAMINATION FEES										
Application Ty	<u>/pe Fee (</u>		ee (\$)	Fee (\$	Small Entity) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Foor !	Paid (\$)	
Utility	<u>ree 1</u>		165	540	270	22()) <u>Fee (\$)</u> 	. <u>rees l</u>	nin 141	
Design	220		110	100	50	140	70			
Plant	220		110	330	30 165	170		-	· · · · · · · · · · · · · · · · · · ·	
Reissue	330		165	540			85 325			
Provisional			105		270	650	325			
				0	0	0	0			
2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$)										
Fee Description Each claim over					52	26				
Each independent claim over 3 (including Reissues)								220	110	
Multiple dependent claims					•			390	195	
Total Claims Extra Claims Fee (\$) Fo				e Paid (\$) Mult		Multiple Depend	Itiple Dependent Claims			
HD = hinhest num		E	ee (\$)	Fee Paid (<u>s)</u>					
HP = highest number of total claims paid for, if greater than 20.										
Indep. Claims	Extra Clain		<u>e (\$)</u>	F	ee Paid (\$)					
- or HP = X = HP = highest number of independent claims paid for, if greater than 3.										
3. APPLICATION SIZE FEE										
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
Total Sheet							of Fee (\$)	Fee	Paid (\$)	
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x =										
4. OTHER FEE(S) Fees Paid (\$)										
Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., 1	ate filing surcharge): <u>1801</u>	Request	for cont	inued examina	tion (RCI	E) (see 37	. 81	0.00	
SUBMITTED BY										
Signature	Littu	ر (Dens	2	Registration No. (Attorney/Agent)	40,953	Telephone	(703) 20	5-8000	
Name (Print/Type)							Date	March 27	7, 2009	